

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000103509

Entity Name: PROHEALTH RESOURCES, INC.

FILED
Jul 20, 2005
Secretary of State

Current Principal Place of Business:

62 INDIAN TRACE
169
WESTON, FL 33326

Current Mailing Address:

62 INDIAN TRACE
169
WESTON, FL 33326

New Principal Place of Business:

4330 WEST BROWARD BLVD
SUITE I
PLANTATION, FL 33317

New Mailing Address:

4330 WEST BROWARD BLVD
SUITE I
PLANTATION, FL 33317

FEI Number: 20-1730544

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUIRAND, NANCY
62 INDIAN TRACE
169
WESTON,, FL 33326 US

Name and Address of New Registered Agent:

GUIRAND, NANCY
4330 WEST BROWARD BLVD
SUITE I
PLANTATION, FL 33317 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

07/20/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GUIRAND, NANCY
Address: 62 INDIAN TRACE, # 169
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GUIRAND, NANCY
Address: 4330 WEST BROWARD BLVD. SUITE I
City-St-Zip: PLANTATION, FL 33317

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NANCY GUIRAND

P

07/20/2005

Electronic Signature of Signing Officer or Director

Date